

SIC - Patri Ġużè Delia, Siġġiewi Primary School Absentee Form

Student's Name and Surname: _____

Class: _____ Date when absent: _____

Reason for absence:

☐ Medical appointment (please attach appointment)

☐ Sickness (but nothing serious)

☐ Personal event (wedding, funeral...)

☐ Other (please specify) _____

Parent's Name: _____

ID: _____ Signature: _____

Please note that if a student is sick for more than 2 consecutive days, a medical certificate needs to be presented. Unauthorised absences are automatically flagged and reported if they exceed 2 days in a month or 9 days in any given period.

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